

## An important message from **Provider Relations**



## Member Lock-In for Medical Services Program

**Effective July 1, 2020**, Home State Health is implementing a Member Lock-In Program for medical services in accordance with the Missouri Code of State Regulations, 13 CSR 65-3.010. Home State Health will evaluate utilization patterns to identify members for lock-in. Members are notified of their locked-in status within 30 days and given their rights to grieve the lock-in.

Once the member selects their physician for lock in, Home State Health shall notify the physician in writing of the selection prior to the effective date of the member's enrollment into the Member Lock-In Program. The physician will have the option to decline participation as the selected provider.

When a member is placed in lock-in, a written referral from the lock-in physician may be required before another provider can be reimbursed for services rendered. The written referral must be submitted to Home State Health for review and approval retained by the referred provider, and furnished upon request. The referral must be dated and is only valid for the time period indicated on the referral.

It is necessary for the lock-in physician to contact Home State Health for each professional physician who is authorized to perform services or prescribe medication. Referrals are not required for:

- 1. Non-ambulance medical transportation
- 2. Home and community based services
- 3. Community mental health (services only)
- 4. Durable medical equipment
- 5. Vision services (routine eye exams only)
- 6. Radiology and most laboratory services
- 7. IP Hospital
- 8. ER or ER Physician (when emergently medically necessary)
- 9. Mental Health and Substance Use Treatment (services only)

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- 10. Family Planning
- 11. OB provider (services only)
- 12. Dialysis

Referrals may be called in at 1-855-694-4663 or faxed in at 1-855-286-1811.

MO HealthNet is in the process of including information in eMOMED to identify Home State Health members who are locked-in to a specific provider. A communication from MO HealthNet or Home State Health will be sent once this is available. Services obtained from a provider other than the locked- in provider without a referral will be denied.

Denial codes are:

**EX A1-** DENY: NO AUTHORIZATION ON FILE THAT MATCHES SERVICE(S) BILLED **EX LZ-** DENIED REFERRING PROVIDER MUST BE MEMBERS PCP TO RECEIVE PAYMENT

**Note:** Home State Health is not responsible for a lock-in program for pharmacy services; this is the responsibility of MO HealthNet.

**Secure Portal Registration:** If you haven't already do so, please go to www.HomeStateHealth.com to register for our Secure Portal. Functions on the portal include: Verification of eligibility, submission of claims, entering authorizations, viewing patient care gaps, etc. Use of the portal is FREE for all services!

Electronic Funds Transfer / Electronic Remittance Advice

- Home State Health Plan partners with PaySpan Health for EFT/ERA services.
- · Please register with PaySpan Health at www.payspanhealth.com